

## MISSOURI DIVISION OF HEALTH - STANDARD CERTIFICATE OF DEATH

-62-006992

DEPARTMENT OF PUBLIC HEALTH AND WELFARE

AMENDED

Registration District No. 164

Primary Registration District No. 3032

Registrar's No. 17

STATE FILE NUMBER

FILED FEB 19 1962

## 1. PLACE OF DEATH

a. COUNTY

Johnson

b. CITY (If outside corporate limits, give TOWNSHIP only)  
OR TOWN

Warrensburg,

Length of stay in 1b

6 years.

c. FULL NAME OF (If NOT in hospital, give location)  
HOSPITAL OR INSTITUTION

321 McGoodwin Street,

Inside Limits

Yes ☒ No ☐

## 2. USUAL RESIDENCE (Where deceased lived. If institution: Residence before admission)

a. STATE

Missouri

b. COUNTY

Johnson

c. CITY

OR

TOWN Warrensburg,

Inside Limits

Yes ☒ No ☐

d. STREET ADDRESS

(If outside, give location)

321 McGoodwin St.

Reside on Farm

Yes ☐ No ☒3. NAME OF DECEASED  
(Type or print)

First

Middle

Last

BERTHA

MAY

CREW

## 4. DATE OF DEATH

Month

Day

Year

February 4th, 1962

## 5. SEX

Female

## 6. COLOR OR RACE

White

7. Married ☐ Never Married ☐Widowed ☒ Divorced ☐

## 8. DATE OF BIRTH

I-14-1888

## 9. AGE (last birthday)

74

## IF UNDER 1 YEAR

Months Days Hours Min.

## 10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired)

House wife

## 10b. KIND OF BUSINESS OR INDUSTRY

home

## 11. BIRTHPLACE (City and state or country)

Johnson County, Missouri

## 12. CITIZEN OF WHAT COUNTRY

U.S.A.

## 13a. FATHER'S NAME

George Billingsley

## 13b. MOTHER'S MAIDEN NAME

Lucy VanDyke

## 14. NAME OF HUSBAND OR WIFE

Crew

## 15. WAS DECEASED EVER IN U.S. ARMED FORCES?

(Yes, no, or unknown) no

(If yes, give war or dates of service) no

## 17. INFORMANT

Address

Mr. Orville Powell, Warrensburg, Mo.

## 18. CAUSE OF DEATH (Enter only one cause per line for PART I. DEATH WAS CAUSED BY:

## IMMEDIATE CAUSE (a)

Cerebral Vascular accident

## INTERVAL BETWEEN ONSET AND DEATH

5 minutes

Conditions, if any, which gave rise to above cause (a), stating the underlying cause last.

## DUE TO (b)

## DUE TO (c)

## PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal disease condition given in PART I (a)

## PART III. If deceased was female was there a pregnancy in last 90 days.

☐ Yes ☐ No ☐ Unknown19. WAS AUTOPSY PERFORMED?  
YES ☐ NO ☐

## 20a. ACCIDENT

## SUICIDE

## HOMICIDE

## 20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in PART I or PART II of item 18.)

## 20c. TIME OF INJURY

Hour

Month, Day, Year

a.m.

p.m.

20d. INJURY OCCURRED WHILE AT WORK ☐ NOT WHILE AT WORK ☐

## 20e. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)

## 20f. CITY, TOWN, OR LOCATION

## COUNTY

## STATE

## 21. I attended the deceased from

1950

to

2-4-62

and last saw him alive on

2-3-62

Death occurred at

3:00 P.M.

m on the date stated above, and to the best of my knowledge, from the causes stated.

## 22a. SIGNATURE

(Degree or title)

## 22b. ADDRESS

## 22c. DATE SIGNED

R. Lee Cooper

M.D.

Warrensburg, Missouri

II-5-62

## 23a. BURIAL, CREMATION, REMOVAL (Specify)

Burial

## 23b. DATE

2-6-1962

## 23c. NAME OF CEMETERY OR CREMATORY

Mt. Tabor Cemetery

## 23d. LOCATION (City, town, or county)

Lafayette County, Missouri

## 24. FUNERAL DIRECTOR

ADDRESS

## 25. DATE REC'D. BY LOCAL REG.

## 26. REGISTRAR'S SIGNATURE

The Brauningers, Warrensburg, Mo.

Feb. 6, 1962

Savannah Hutchfield

(Licensed Embalmer's Statement on Reverse Side)

**STATEMENT BY LICENSED EMBALMER**

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me,  
or by \_\_\_\_\_, Student Embalmer No. \_\_\_\_\_  
working under my personal supervision.

Student \_\_\_\_\_  
Signature of Student Embalmer

Signed \_\_\_\_\_

Licensed Embalmer No. 4739

P. O. Address Waverburg, Mo

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license).

If embalmed by a STUDENT, he also shall sign in his OWN handwriting.

If this body is not embalmed, fact should be so stated above.